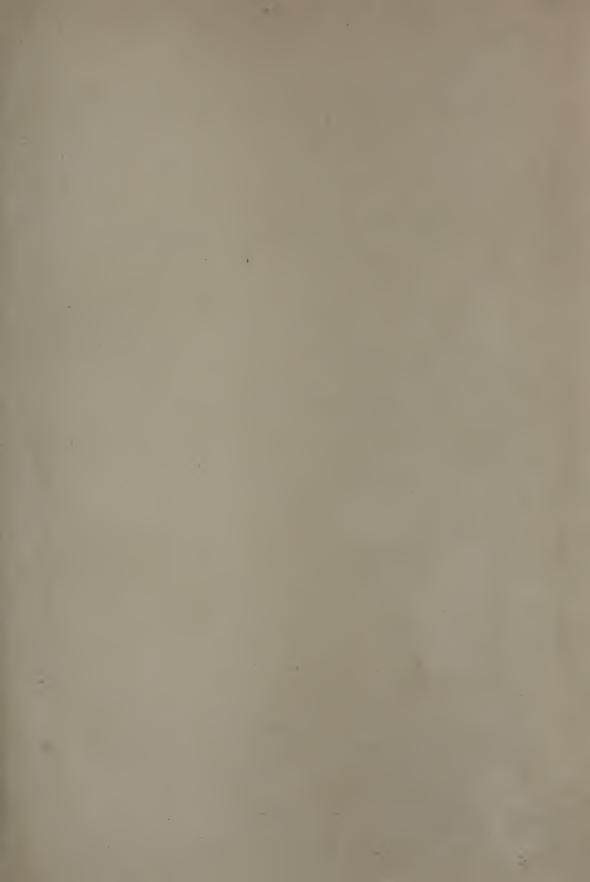


LONDON MISSIONARY SOCIETY

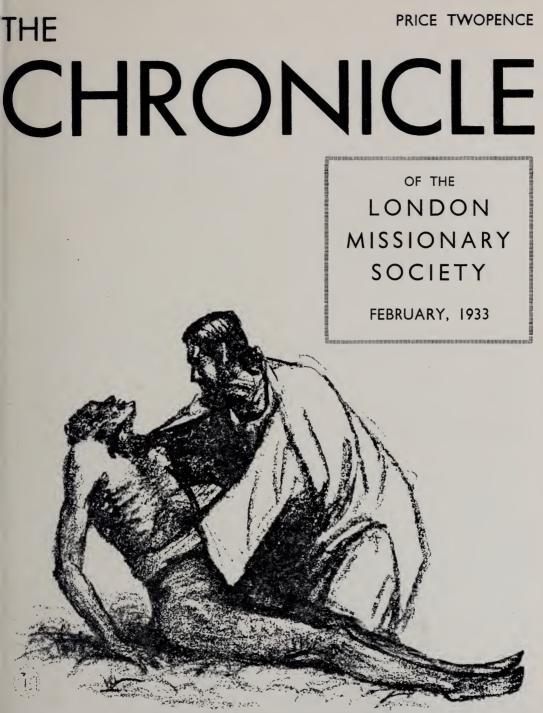
1933





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THE GOOD SAMARITAN. Drawn by Hirasawa, a Japanese artist.

L.M.S. MEDICAL MISSIONS WEEK FEBRUARY 12th-19th

The Register

Arrivals

Miss E. H. S. Murray, from Shanghai, December 9th. Rev. A. Sandilands, from Lake Ngami, December 12th.

Rev. W. F. Dawson, from Peiping; Rev. F. G. Onley, from Wuchang, December 13th.

Dr. J. L. H. Paterson and Miss K. B. Evans, from Shanghai, January 4th.

Departures

Rev. and Mrs. A. J. Hutchinson, returning to Hweian, per s.s. Naldera, December 9th.

Mr. and Mrs. G. H. Marsden, returning to Nagercoil, from Venice, December 16th.

Dr. Mary Kwei, returning to Wuchang, per s.s. Isar, from Genoa, December 23rd.

Dr. Hilda M. Pollard, returning to Erods, per m.v. *Victoria*, from Naples, December 29th.

Dr. R. Maitland Alderton, appointed to Hong Kong; Mrs. Evan Rees, returning to Calcutta, per s.s. Rajputana, from Marseilles, December 30th.

Miss A. M. Foster, appointed to Central China, per s.s. Corfu, January 6th.

Births

PHILLIPS.—On October 9th, to Rev. and Mrs. S. G. F. Phillips, of Malua, Samoa, a son, Malcolm Vasa.

DRIVER.—On December 1st, at Ranipet, to Dr. and Mrs. A. H. Driver, of Jammalamadugu, South India, a son.

BURTON.—On December 6th, at Tananarive, to Mr. and Mrs. G. E. Burton, twin daughters, Jacqueline Margaret and Yolande Violet.

Watchers' Prayer Union-New Branches

Church.	Secretary.
Woodford Avenue.	MR. E. W. RAVEN.
Emsworth.	Mrs. Francis.
Troutbeck Bridge.	
Castleford.	MISS WHEELER.

Contributions

The Directors gratefully acknowledge the receipt of the following anonymous gifts : Dafis, 105.; J. C. K., 105.

Summer Conference, 1933

Will you book the dates for Swanwick, August 12th to the 18th? Last year many people were disappointed because they registered too late, and we were overcrowded; but preference will be given this time to those who have never been before. Will you make quite sure that at least one person comes from your church. The subject is to be "The Need of the World for Christ."

Registration forms are now available. Please apply to Miss Joyce Rutherford, Livingstone House, Broadway, S.W.1.

Monthly Prayer Meeting

The next meeting will be on Friday, February 17th, at 5.30 p.m. Rev. Jas. Beeby, representing the Streatham Group of the M.A.C., will preside, and Mr. F. H. Hawkins will also be present. A large attendance is hoped for.

Young People's Meeting

On February 9th, Mr. H. S. Keigwin, M.A., M.B.E., will be the speaker. He has had a wide experience as a Government official in Rhodesia and West Africa. "A Bird's Eye View of Africa" is his subject. There will also be a Song Recital by Miss Alyce Fraser, the famous West Indian soprano.

All young people are cordially invited.

Buffet Tea, 6 to 6.30 p.m. Song Recital, 6.30 to 7 p.m. Address, 7 to 7.30 p.m.

Luncheon Hour Talks-for Men

All men are welcome to attend these luncheons they are held in the Library of the Memorial Hall, from I to 2 p.m. prompt. Charge for luncheon, I. 6d. Printed programmes of the series may be had on application to Rev. S. J. Cowdy, L.M.S., Livingstone House, Broadway, Westminster, S.W.I.

On Wednesday, February 8th, Rev. Canon F. Lewis Donaldson, M.A. (of Westminster Abbey), will speak on "The Perils of our Civilisation."

On Wednesday, February 22nd, Sir George M. Gillett, M.P., will address us on "Forty years back-wards."

Wants Department

Medical Missions are especially thought of in connection with the week of thanksgiving, prayer and selfdenial this month. All-day working parties for our hospitals should be arranged. All details regarding such can be secured from the Wants Department, L.M.S., Livingstone House, 42, Broadway, Westminster, London, S.W.I.

Other things needed are :

Typewriters.

Sewing machine.

Duplicator (Gestetner or Roneo).

Two Sterilisers for Hospitals.

Microscope (also for Hospital).

Gramophones and Records.

Wall Pictures of New Testament Scenes.

Violins, and

Lengths of print or silk.

Parcels should not be sent without first asking for the leaflet, "How to Send Parcels Abroad," from same address as above.

Wall Pictures

An opportunity occurs for friends who may wish to send Scripture wall pictures to the mission field; some are available at 1d. each. Apply, Publications Manager, Livingstone Bookroom.

ABOUT REMITTANCES TO THE L.M.S.

HOW TO REMIT. It is requested that all remittances be made to the Rev. Nelson Bitton, Home Secretary, at 42, Broadway, Westminster, S.W.1; and that if any gifts are designed for a special object, full particulars of the place and purpose may be stated. Cheques should be crossed Bank of England, and Post-office Orders (which should be crossed) made payable at the General Post Office.

TO LOCAL TREASURERS. It is PARTICULARLY REQUESTED that money for the Society's use may be forwarded in instalments as received, and not retained until the completion of the year's accounts. This would reduce the Bank Loans upon which interest has to be paid. The Society's financial year ends March 31st.

LOANS TO THE SOCIETY.

With the view of reducing the large amount which is paid in interest on Bank Loans, the directors wish to state that it would be a great financial help if friends of the Society were prepared to advance sums of £100 and upwards free of interest for periods of not less than three months. In the case of advances for unfixed periods repayments could be made at ten days' notice.

THE **CHRONICLE** Of the London Missionary Society FEBRUARY, 1933

THE HOUSE OF LIFE

Adventures of real African Girls. By MARGARET E. MORTON, M.R.C.S., L.R.C.P.

THERE are two kinds of medical work in Africa, curative and preventive, and the number of hours spent on the former yields good fruit, but we have greater hope still of the fruit that will appear from teaching our schoolgirls at Mbereshi, the future mothers of the race, the means at their disposal for preventing and curing diseases themselves in the early stages. There are wide and thrilling fields for curative medicine in Africa, but we feel that more important still for the Africa that is to be is this teaching of preventive medicine.

If, therefore, you come to see the medical work at Mbereshi you will see something of our village hospital for general medical work, but more of the House of Life or Maternity and Child Welfare block run in connection with Miss Shaw's Girls' Boarding School, where we are hoping to build up a healthier Africa.

The village hospital is a group of four houses, one a dispensary and operating theatre, one a store, one for isolation, and one divided into five two-bed wards and a dressings room. These are with difficulty kept clean by two boys who attend twice daily, or more frequently as necessary, and injuries, burns, ulcers, fractures, malaria, coughs, colds, bad eyes, as well as pneumonia and dysentery, are treated here. The boys also visit systematically in the village itself and report to me. One morning a week is devoted to injections, and so great is the African's belief in the needle that he will demand it for every complaint. Emergency surgery has to be dealt with as it arises.

Now we will go to the House of Life, and by nine o'clock on this morning all the big girls in the school have come down for a class of mothercraft. A new-born baby has been brought up for bad eyes, so this morning the class will be on the care of the new-born, and Rebecca, the senior nurse, will give a demonstration, washing and dressing, and eye washing, while all the girls note down everything she does and the reason why. The baby, clean, dry, and comfortable, is handed to the granny, who is told to bring it again, when the sun is overhead, for more medicine. There has been an increasing noise outside through classtime, and when the girls return to school a crowd of women and babies comes in on the



Demonstration by the senior nurse. Remonstration by the baby.

calling of names from the register. Six of the girls, dressed in caps and aprons and with books and pencils ready, join with us all in prayers and listen to the health talk for the mothers, and then the fun begins! Each girl has about fifteen babies for which she is responsible every clinic day. She keeps a record of their health, cleanliness, and weight, and washes them all each time, the times in basins with warm water, and bigger ones in a pool where they love to play. Then each child is weighed and the healthy ones return to the village, while sick ones come for treatment in the dispensary. The girls learn how to do dressings, wash out eves and ears, and give medicines, and then they have a question class on the treatment of their own particular babies.

That is our work on three mornings a week, and every morning there are daily dressings to be done, when the House of Life staff of four nurses in training learn by doing the dressings and giving medicines under supervision. A fourth morning is devoted to the women's clinic, and here again we make use of all our clinical material for teaching our embryo nurses and midwives, who every afternoon have classes in midwifery, nursing, physiology, anatomy, principles of medicine and surgery, first-aid, etc., and for their practical nursing they take charge of all our sick children from the school. Morning and evening temperatures —sometimes four-hourly—bed-making, ward management and cleanliness and reporting are all taught, while times on and off duty are gradually becoming recognised as laws. All the hospital washing and sewing is done by these nurses.

Thus do we hope to turn out, as the years pass, some girls definitely trained as general nursing midwives, but still more, all our girls with a knowledge of the prevention of disease and the care of themselves and their children, as well as practical hygiene which they learn daily in school. There will arise a generation of Africans whose fears will no longer be of evil spirits, but of dirt and disease and insanitary conditions, a generation which will claim with us that life abundant which it is ours to share with them in Christ's name.

In Our X-ray Room

COULD you walk into the hospital compound about dusk almost any evening you would see a group of people standing at a door. Some would hold charts in their hands, others would show on their mouths and down the front of their chests the evidence of a barium meal hastily gulped down. (This barium meal looks like whitewash, and is given to make the organs visible in the X-ray.)

Then there is a man and woman with their little girl, her leg tied up in splints. While you watch, two coolies bring down a stretcher with a patient in it surrounded by relations. Who are they ? Why do they stand there ? This is the X-ray clinic waiting for the "valia sahib" (Dr. Somervell) or the "chinna sahib" (Dr. Orr) to come and look inside them with the "kanadi" (X-ray). Their faith in the powers of the X-ray is unlimited; most of them have heard about the wonders of that dark room from old patients and all are quite confident that the devil or the animal which they believe is the cause of the trouble will be exposed in his wickedness and dealt with on the spot. There the sahib comes, followed by a little group of assistants and more patients, and there is a general scrum to get in to see the fun. Of course, everybody wants to see somebody else's interior.

The light is put out, and the first barium meal case is put before the screen, the green fluorescence shines up, and all necks are craned to watch the dark shadows that the sahib is feeling with his fingers. Then the patient gives a little gasp of pain as the tender spot is touched. Two or three stomach cases come first. Then the little girl with the leg had to get a picture taken. She will have to be admitted for an operation on her thigh. So we go on one after another. The poor are treated as carefully as the rich, and there is a great difference between treating patients as human beings with feelings of their own, and merely treating them as cases. There is all the difference in the world between helping a poor coolie woman on to the table oneself, and ordering her to get up unaided. The meaning of the phrase "As you have done it unto one of the least of these " becomes more clear. This Gospel that we preach by action is no "sounding brass and tinkling cymbal." (From Drs. Somervell and Orr, Neyyoor.)

Christianity Illustrated

A Note on the Wardlaw Thompson Hospital, Chikka Ballapura.

By R. A. HICKLING.

UR four hospitals in South India are a great glory of our Society. Those at Neyyoor, Jammalamadugu and Chikka Ballapura are General Hospitals. The first two, with the lovely Women's Hospital at Erode, serve areas in which there are large Christian communities. That of Chikka Ballapura has to do almost entirely with Hindus and Mohammedans who, for the greater part, have not heard the name of Christ. All our hospitals have come into being in the ordinary course of our evangelism and, beyond the comfort and the blessing which they bring to so many sufferers, they are great illustrations, both to those within the Church and to those outside, of the meaning of the Gospel.

Gandhi and the doctors

The Chikka Ballapura Hospital is very convenient for the study of some of the common objections of uninformed people to Medical Mission work. Among these must be placed Mr. Gandhi, when he speaks of the injustice of preaching to people who are helpless in hospital. He knows medical



Dr. T. T. Thomson and family, Mr. R. A. Hickling and the other members of the bospital staff at Chikka Ballapura.

missionaries, though he has not been in hospital. When he fell ill at Nipani the man that was sent for post-haste was Dr. Wanless of Miraj. From Nipani he came on to Chikka Ballapura, to our hill of Nandhi, and the very next morning sent for Dr. Thomson. He was pleased with his doctors and would have been just as pleased with their work in their hospitals if he could have seen it. He would have found no ground for his complaint. In his own way, I admit, he had some of the "preaching," but he didn't seem at all sorry. He would probably have had it quite apart from the Medical Mission, and I rather think that, in the world of adulation in which he dwelt, he was glad to find that there was something different.

No compulsion

For those who take it for granted that our hospitals represent the meanest things in religion rather than the noblest, nothing could be more useful than to be present at prayers or a ward meeting. The notion of compulsion is not present at all. Almost

everyone who can limp or be helped to the big ward comes. There is nothing to account for the hospital but religion, yet it must be something very different from what they have known by that name hitherto. If only to know more about it they must come. Some of the audiences on Sunday afternoons are among the most impressive things I have ever seen in Chikka Ballapura. There are always a number of people with the patients. Many of them bring a friend or two to look after the funeral in case of

accidents, and most of them need someone to cook their food when they are over the worst. These nearly all come, and with the convalescents form a most encouraging part of the Sunday afternoon company. As one leaves the ward after the service, with everyone plainly waiting for more, one does so with great reluctance. On special occasions men and women patients are called together to the corridor between the Operation Block and the linen This makes room. matters a little more



formal, but everyone enjoys being in the larger company, and prayer becomes a greater reality. This, indeed, is one of the things really pressed upon everyone that prayer and faith are essential in our kind of hospital, and we ask them to assist us by praying for themselves and their friends.

Indians pay their share

It is, I think, not sufficiently realised that almost everyone who comes to a Mission hospital does so from choice. In Government hospitals and dispensaries people can get treatment for practically nothing. In our hospitals most people pay, and pay well, according to their means. They agree that Christian people in England should not bear all the expense, and though it must be admitted that the amount of the contribution from well-off people is sometimes a matter of irksome discussion, this is really no more than what is considered proper in any matter of money in India. When the assistant needs moral support he can generally get it from someone who has already fixed his contribution. He will rather enjoy seeing that the new man pays up to his reasonable limit. Last year the contributions at Chikka Ballapura, almost all from non-Christians, amounted to £400, a large sum for India. It is an interesting thing that those who seem most determined to get as much of the preaching as possible are those who make the big gifts. When, in

A Ward, Chikka Ballapura.

itinerating the country, you find such a man you are sure of a useful friend.

Common prayer

Some of the patients, before they leave, get into the way of coming to morning prayers. Every morning at seven o'clock all the staff meet in the Consulting Room, and everyone, from the Medical Missionary to the youngest nurse, takes his turn to lead the prayers. Before commencing the day's work they submit themselves anew to the Lord of the hospital, and the patients know it. All our medical people, of course, have the disadvantage of being supposed, in all they do, to have their own Karma chiefly in mind, and to be out for accumulating merit. This cannot be helped, but we may be sure that as they labour in the Gospel the old bleak notions disappear and the Sun of Righteousness arises on many a blighted spirit with healing in His wings.

The Hospital has 70 beds and last year there were 1,050 in-patients and 15,865 out-patients.

Easter Conference.

You may be just in time with your booking for the Metropolitan Auxiliary Council Easter School to be held at Digswell Park, Welwyn. Field of study, "Island Missions." President: Rev. Barnard R. H. Spaull, M.A. Speakers: Rev. G. H. Eastman and Mrs. Eastman, Rev. Reginald Bartlett, Rev. A. M. Chirgwin, M.A., Rev. L. T. Towers, M.A. Write at once for particulars to T. A. Mitchell, "Wendon." Coulsdon Rise Coulsdon Surrey

"Wendon," Coulsdon Rise, Coulsdon, Surrey.



Hweian Hospital. 48 beds, 392 in-patients, 2,983 out-patients, last year.

Doctoring Out East

By G. REYNOLDS TURNER, M.B., Ch.B., of Hweian, South China.

ANY years ago I was travelling in the Hweian country. It was summer-time, and I was using that vehicle which is fast becoming obsolete-the sedan chair. My bearers had reached one of the rest hamlets which used to be found every three or four miles along the narrow paths which were the main roads of those days, and they had placed my chair under one of the banyan trees which are planted in a cluster to give shade to the small groups of houses and wayside stalls. They and the burden-bearer had gone off to get some food, and I was sitting reading in my chair. As usual, a group of curious folk had gathered round to gaze at and pass comments upon the weird and ugly barbarian. After a bit some "He's of them began talking about my job. the doctor up in the city," said one. " I don't suppose he's much good," said another.

Making a fortune

"Oh, he's not so bad," was the answer; "he made so-and-so from my village better after many of our doctors had treated him without avail." "My word, he must be just piling up money and making a fortune," exclaimed another.

This was too much for me so I got out and joined the group and explained that no fortune could possibly be made out of the very small sums charged at the hospital an argument that soon carried weight with those whose minds were not obsessed by current preconceptions about these "outer barbarians." I think I even got many to believe that work such as I was doing could not be done unless good friends of China in Britain supplied money to pay for me and to help in that work. Still, it was a difficult morsel for them to digest, and one broke out : "You could surely make much more money by staying in your homeland and doing your doctor's work there." My answer that probably this was true, but that such a life would not satisfy my desire to do the work that I believed God planned for me, left the group in doubts, until one said : "Ah, I've got it, he's just come here to pile up merit so that he can qualify for a very excellent position and a really good time in heaven, which he can do much more quickly here than he could in his own country."

Western medicine approved

It was, probably, this sort of inability to square facts with a rational idea of life as conceived by the hard-headed and materialistic Chinese that led to the fable that foreign doctors took out Chinese children's eyes to make them into medicine. To-day one does not hear much of this sort of talk—in South Fukien, at any rate. "Western medicine" has gained a firm foothold, and numbers of Chinese are practising it all over the country. There are many very able Chinese specialists and doctors in the big cities who are doing work that is a credit to the highest ideals of medicine and surgery, and their numbers are growing fast.

I think there are few professions and services in China where there have been such marked and fruitful advances during the past three or four score years as have taken place in those of medicine and public health, and this may fairly be claimed as an advance in which medical missions played a large initial part.



The entrance to Hweian Hospital.

China's own medicine

There is evidence to suggest that in past ages China had medical men with no mean knowledge and understanding of their art. but the dead hand of tradition and the slavish worship of ancestors killed initiative and any desire for research in this and most other human activities. As a result, doctoring at its best became a means of livelihood to a family; secrets of treatment being passed from father to son or to close relatives, secrets never divulged to others and treasured for their financial value rather than for the chance they gave of relieving suffering. At its worst, doctoring is a mixture of charlatanry, superstition and ignorance which brings profit to China's myriad quacks,

necromancers and priests, and gives them a strangle-hold on suffering humanity.

Enter the missionary

With the advent of medical missionaries men like Lockhart, to mention only one of a whole host of noble pioneers—a new day began to dawn for this vast country. Whereever such a messenger was at work, people asked one another what it meant and why any sane mortal should spend his life in this

way. Conversations and questionings, such as that reported at the beginning of this article, doubtless were common and often took place where no reasoned reply was obtainable. Is it very remarkable, then. that strange and terrible fables became current amongst people whose only touchstone by way of comparison was a grasping quack or a secretive practitioner. who both were out to make what they could from the unfortunate patient? For a long

time the uphill fight against preconceptions, ignorance and misunderstanding went on, and is still going on in many places and in some strata of Chinese society; but in other places and among many classes of people that fight has been fought to a finish, and the beneficent physician is coming to his own. This, in part, is due to enlightenment through the printed page, but much more largely through living practice-though the truth of that statement might be hard to tabulate. I think it is fair to say that what no amount of printed propaganda would ever have accomplished satisfactorily, has been and is being accomplished through the lives of men and women, doctors and nurses, who give a whole-hearted and unselfish service



Dr. Reynolds Turner and assistants.

to the suffering. Not a few of those who did and are doing this were, and are, foreign missionaries, and nowadays a very great many are Chinese. In every place where such folk live and practice, be it a large city or a country town or village, an influence is at work and an example is being lived which, in the end, reforms the lives, minds and outlook of men, and makes for a sanity that comes only when love—like that which Jesus reveals so fully—gets into action.

The greater peril

We have heard a good deal about "the yellow peril "—that peril which is supposed to threaten the world when China's teeming millions shall be free to join in the rubbing and grinding that is taking place between its component parts, for then, it is said, the friction will be so great that enough heat will be developed to cause a terrible conflagration. There is a more imminent "yellow peril" than that, I believe, and it is

so because its factors are even harder to control than men—it is the peril of disease. In these days of increasingly rapid intercommunication and ever closer international contacts, the peril of the spread of disease from one country another is constantly to growing. We may be thankful that medical missions play so helpful a part in waking people to the need for dealing with disease and the diseased. It would take too long to mention even a few of the many hospitals in China for which government, gentry, philanthropic bodies, private individuals and missions are responsible. My readers will know about those in which the L.M.S. has the chief or part interest, and remember them thankfully. All need staunch support, for they still have a responsible part to play in this Christlike activity. Some are badly crippled for lack of funds, though it must be remembered that the Chinese themselves are increasingly generous in the support of such institutions.

China's new efforts

Let me close with a very brief list of a few of the many other outstanding medical services in China. Between fifty and sixty years ago a Chinese Medical Missionary Association was started with a magazine of its own. This is now amalgamated with the Chinese National Medical Association to form the Chinese Medical Association which publishes a monthly journal. This Association held its first general Conference in Shanghai quite recently. There is a China Nursing Association, a National Epidemic Prevention Bureau, a National Quarantine Service linked to the League of Nations International Service, the Henry Lester Institute of Medical Research in Shanghai, etc., etc.

Considering all this, may we not hopefully say: "Behold how great a matter a little fire kindleth," and shall we not take courage to continue and even to increase the support in prayer, work and money which we give to medical missions ?



"1 HIS ONE WILL HAVE A CHANCE." A Chinese nurse in the Shanghai Hospital with a new arrival in the maternity ward.

Lady Evan Spicer

A great hostess, who showed to thousands England at its best.

N the death of Lady Spicer, Congregationalism has lost one of its noblest women, and the news of her passing will be received with deepest sorrow by her friends in all parts of the world. None will

mourn her more sincerely than those of our missionaries-and they were many—who enjoyed the hospitality of her home whilst on furlough. She was indeed an ideal hostess. as missionaries, ministers, church workers and many other friends will most cordially testify. Hers was no merely polite welcome, but the sincere greeting of one who really delighted in having her friends in her home.

If her home at Dulwich was beautiful in its surroundingsits fine old trees, its sweeping lawns, its charming lake-these were but a symbol of the spiritual beauty of its atmosphere. Here the tired worker discovered peace, sympathy and friendship in abundance, and under the genial kindness

of God.

of host and hostess, found fresh strength and

inspiration for new endeavours in the service

centre outwards in ever-widening circles.

and if her first love was given to her own

home, her first thoughts to her own church,

her loving sympathy for the whole human

Lady Spicer's interests moved from the

best.

The sympathy of the readers of The Chronicle will go out to Sir Evan Spicer and the family in their great loss. Lady Spicer found her way to all hearts, and it will be some consolation to them to have the assurance that their sorrow is shared by the many who knew and loved her.

J. A. P.

ON A MEDICAL MISSIONARY IN MANCHURIA.

As he went about among the Chinese people, he became one of them, sharing their life, thought and aspirations, and, above all, he sought always first the interests and welfare of the people among whom he came to serve. This is what makes him a great missionary, and this seems to be the only way to win the heart and confidence of the Chinese people.

We have a saying in the Chinese classics, "By force we can never subdue people, but by kindness we will win their hearts and make them really followers." Love conquers.

(H.E. Sao-Ke Alfred Sze, Chinese Minister in London, in Foreword to "Life of Dugald Christie.")

race found expression in her work of the London Missionary Society and kindred organisations which seek the world-wide reign of Christ. For many years she was a Director of the L.M.S., and a member of

various committees. and although these activities had to be given up in later years, she continued to give all the help she could to the Society.

For forty years, during the summer months, her home and garden have been the scene of innumerable gatherings, and only two or three years ago the members of the International Congregational Council were entertained at a garden party "Belair." On th at On that perfect summer afternoon the garden looked its loveliest, and one heard American and Australian visitors exclaiming : "This is England—at its best"; and the courtesy of host and hostess made one feel that this, too, was England at its

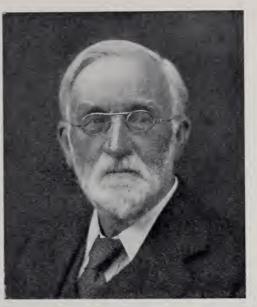


THE THREE YEAR PLAN Nothing except Self-denial

Dr. Horton has more than once led Forward Movements in our Society. The greatest of them, which aimed at the addition of a hundred missionaries by the Centenary Year (1895), owed much to the fact that he was one of those responsible for the wide appeal then made. To-day, after completing his inspiring ministry of fifty years in Hampstead, his voice and pen still serve the wider field, and his words will meet with cordial respect everywhere. It is fitting that his message should call for the new advance in the Three Year Plan.

TE must prevent the annual deficit of £17,000, or in two or three years at the most we shall have to speak the dread word, "Withdrawal." With much thought and prayer the "Three Year Plan" has been formed; and this means that the increase from the churches must be £8,000 this year, and the further increase must come in the two years following. This gradual approach makes it easier to begin. First we ask : "Does Christ wish further curtailment of our Does He wish missionaries work? to be sent home? Does He wish fields to be given over, schools, colleges, hospitals to be closed ?" Every one of us answers : "No, it cannot be His wish." Therefore it must be His command that the additional £8,000 should be raised by the churches before the end of the Financial Year.

What must we do to fulfil. His purpose? We must tread the path of self-denial, and we must all pray,



Dr. R. F. Horton.

earnestly, believingly, unitedly. We often wonder what He meant by taking up the cross to follow Him, and so demonstrate our discipleship. Here in a vivid flash we see what He meant. Each of us must give up something, must forego some pleasure, must deny himself, must deny herself, for His sake. If every one of us asks: "What can I give up? How can I offer to my Saviour something in addition to what I have done ? " there will be an illumination, a discovery. Every member of His church will be saying : "Why, I never thought of that; I never saw what I could do without !" And then the churches will exclaim : "It is done." And whatever it has cost. the joy will be unspeakable. It will be Christ's own doing, for all has been done for His sake.

Let the daily prayer of each one of us be: "Show me what I can do, and show all the others what they can do, for Christ's sake, Amen."

ROBERT F. HORTON.

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THE THREE

Passed by the Board with high resolve

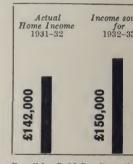
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What it is

The Three Year Plan is a business-like attempt to balance the budget without undue hardship to the contributing constituency. In doing this the words "crisis," "deficiency" and "withdrawal" will be wiped out of the L.M.S. vocabulary, and words like "balance," "surplus" and "advance" will be substituted. It is a plan that has been evolved after the utmost has been done in the way of economies in expenditure, including a "cut" of salaries for everybody in the Society's service. The deficiencies for the last ten or twelve years have averaged over £20,000. After the economy "cuts" there is still a deficiency of some £15,000. The plan is to get rid of this within three years ending March 31st, 1935.

Why it is necessary

Some such plan is now urgently necessary because of the accumulated debt which has reached the figure of \pounds 72,000. If this is increased very much more the Society will be unable to continue its operations during the year. It meets bills by means of an overdraft at the Bank. It cannot do it in any other way, because three-quarters of the contributions are paid in the last quarter of the year. The reserves of the Society enable it to secure this overdraft at the Bank. If its reserves are much more eaten into by the accumulated debt this will become impossible. It is therefore essential to balance the budget.



Possible L.M.S. Contrib Great Britain ... Estimated number of Pr

How it is to be done

THE WAY OF ECONOMIES.—Already (January, 1933) every possible economy has been effected, and there still remains a margin of at least £15,000.

THE WAY OF WITHDRAWAL.—To cut £15,000 off the expenditure would involve the closing of stations and the recalling of missionaries. How many missionaries? At least 35.

THE ONLY WAY is to increase the income, and the Three Year Plan is a method of doing this in three stages.

The Board will be justified of its faith in carrying on

THE GREAT THINGS

Our Missionari withdrawal

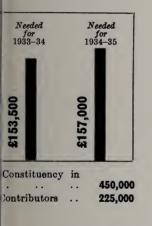
YEAR PLAN

y the Churches If-denial

Agreed to by the Auxiliaries with real determination

This year's share

This current year's share of balancing the budget is to find an extra £8,000. This amount is not an arbitrary figure just put down or guessed at. It is a figure arrived at after consultation with all the Auxiliaries, and agreed to by them as a possible increase this year, and so was set forth to the churches at large. This year's share is vital to the whole plan. The Board is determined to balance the budget and has further resolved that if this income is not realized, expenditure must be reduced proportionately. Whether that reduction is big or little, it cannot be effected without withdrawal in some measure.



A quota for every Auxiliary

In a series of Auxiliary Conferences held during the summer, the quota for each Auxiliary was discussed and agreed upon. It is by the simple addition of these quotas that the figure of £8,000 has been arrived at. It is only by the achievement on the part of each Auxiliary of its quota that the plan can succeed, and therefore if even one Auxiliary fails to reach its quota it will be most serious.

A quota for every Church

The quota method does not stop when an Auxiliary has accepted a figure for its district. It goes on to make a quota for each Church. The Auxiliary officers agreed that this could be done by October. Has your Church had its quota suggested for its consideration ? If so, have the methods and means of reaching it been decided upon ?

If your Church has not received from the Auxiliary its quota, then the best way to decide it for itself is to take an average of the last four years, including the year 1928, and regard the average as its aim for this current year.

The advantage of the quota method is clearly that each Church should know exactly what is its share towards the great end of balancing the budget. The disadvantage of the quota method is that it so entirely depends for its success upon every single Church doing its share. Should one fail the whole plan to that extent fails also. The share of your Church is vital.

HAT WILL BE DONE

nxieties regarding be removed

The spiritual life of our Churches will be greatly strengthened

Reaching the Quota

How a Church can do it

ERE is an ordinary church trying to meet the call of the L.M.S. and do its duty by claimant calls of its own and its county, and "unemployment" and other needs. Several years ago it doubled its L.M.S. contribution; then it gave an additional donation, equal to a 15 per cent increase, to the Ship Fund; then it was asked to make that a yearly increase. Last year it did it, and hopes at least to maintain it. Our job is to consolidate our gains, and, if possible, advance. What has been done has been done alongside other claims, and more especially the purchase of a Manse, involving a considerable increase of annual expenditure.

The L.M.S. claim has been met, and I trust, will, largely because we have carried the church with us ; we have not worked from a small missionary committee only, but through the church meetings ; we have tried to make all the missionary administration efficient, so that the monthly meetings should attract the people and not a few enthusiasts ; New Year Offering cards have been offered to older and younger scholars ; sympathetic explanations have been given before Special Fund collections ; the magazine has been utilised ; the Dramatic Society has been asked to devote one of its two annual efforts to the L.M.S., and so on.

There is nothing out of the ordinary in these and other things that might be mentioned; nothing to alienate church officers, whose concern it rightly is to keep the church out of debt; nothing to make anyone feel the "missionary folk" are "mad on missions and indifferent to everything else"; no stunting; just an honest attempt at that efficiency, backed by prayer, which it seems to me the average church can make and sustain.

> V. A. BARRADALE, Minister of Victoria Road Church, Cambridge.

How an Auxiliary can do it

FIRST of all by informing the churches of the present financial situation and the reasons for the appeal for increased giving, and then securing their goodwill and friendly co-operation. This is best achieved not by meetings, which may be sparsely attended, but by personal letters to each minister, lay pastor and church missionary secretary. These are the folk who can best acquaint deacons and church members of the facts.

The Auxiliary officers (who should, of course, know much of the position of each church) then prepare a carefully considered and reasonable allotment for the individual church and make suggestions as to the methods in which it can be achieved. These would of course be based upon the past records and the number of special offerings (such as Medical Missions and N.Y.O.) that the church makes. The officers offer themselves to assist in arranging Missionary evenings and support them either by speech or presence. Sales, suppers, plays, Swanwick evenings, lantern lectures, social box-openings and indeed any friendly interesting functions prove an enormous help, and should not be confined only to the one particular church concerned. Bookstalls must not be forgotten, as greater knowledge brings larger support, and folk are really keen to buy the excellent and attractive missionary literature now available, when they see it.

The Annual Meetings require foresight and careful planning. Especially is this so in the village churches. The Auxiliary provides window-bills advertising the meetings, arranges for a chairman to go out with the Missionary, and obtains the loan of a car for the purpose, sees that an agenda is provided, suitable hymns selected, and the organist and choir are in attendance. These are things that are often overlooked, but they make all the difference to the success of a meeting or otherwise. The children should be asked to come, and if some generous heart offered a book prize for the best two-page letter reporting the Missionary's address the children would be doubly interested.

The golden rule is to get everybody to feel they have a share in the great missionary task. Touch the heart, foster the interest, and there's no need to worry about the financial result.

S. J. BAYLISS, Secretary, Bristol Auxiliary.

Medical Missions not a Side-show

By EDWARD SHILLITO, M.A.

Ι

T is necessary to defend Medical Missions from attacks on two sides. Some say, "We do not believe in missions, but medical missions—that is a different thing : we are willing to support them." Others will say, "We are in favour of medical missions because they pave the way for the preachers of the Gospel; they provide an attractive side-show." Against both these critics we have to defend our Medical Missions. It has more than once been declared in The Chronicle that the medical missionary is the very first to resent the contrast which is drawn between himself and his evangelist colleague. He is ready to stand side by side with his fellow-workers who preach and teach and write. He does not welcome the praise which is given to him at the expense of his team. And the Christian Church which abandoned the direct preaching of its Word and gave all its missionary zeal to the healing of human suffering would stand condemned for its unbelief and cowardice. We have still to proclaim the Kingdom as well as heal the sick.

Π

But with the other charge also we have to deal. It is equally erroneous; medical missions are entirely misunderstood if they are treated as a side-show, to be sharply distinguished from the main purpose of missions. The idea of those who speak in this way is that the doctor should stand in the ways of men, and by offering them his healing, induce them to go past him into the place in which they, being now favourably prepared, will hear the real message of Christ and His redemption. There is no medical missionary in the world who would accept this view of his calling. He is not an advertiser of the gifts which others have to bring. He is not there to make "the Gospel attractive." He is there that through his science and his skill the character and purpose of God as we know Him in Christ Jesus may be revealed, and the power of that redeeming Lord may be released.

III

We have only to go back to the New Testament to see what part the medical

missionary has in the work of the Christian people. Jesus did not send His disciples forth to heal the sick in order that they might have the way open to their chief task—the preaching of the Kingdom. In healing the sick they were revealing the finger of God; they were introducing the Kingdom and releasing the powers of the age to come. That truth we may and should express in our own language; but it still remains as true as it was in Galilee, or by the beautiful gate of the Temple. They who heal the sick, *in healing the sick* are proclaiming the glory of God, which is His redeeming love.

IV

For what is the chief end of all missionaries? It is to proclaim the good news of God. And what is this good news but that there is a heart of love beating in this mysterious universe. It is to declare that "the universe is friendly"; that they who will work with God and seek to read His thoughts after Him will find that there are amazing powers of healing and inexhaustible treasures waiting to be released. It is to believe, that

He forgiveth all our iniquities He healeth all our diseases.

The doctor and the nurse are perfectly willing to speak when occasion serves, and they do not think that their speaking is to be contrasted with their doing.

V

When Mr. Gandhi was in London he advocated before a large company of missionary leaders his favourite plea that the missionaries should be like rose-trees, which spread their odours and do not need to explain them. One who was present said, in the course of the discussion : "Mr. Gandhi, you have probably more followers than any other living man. Will you tell us how you won them?" The Mahatma answered that he had no followers; but clearly a point was made by the speaker. As a matter of fact the modern Nationalists have used both the spoken and the written word with remarkable skill and persistence to spread the cause. Everybody who has something of moment to share with others must and should use words. The medical

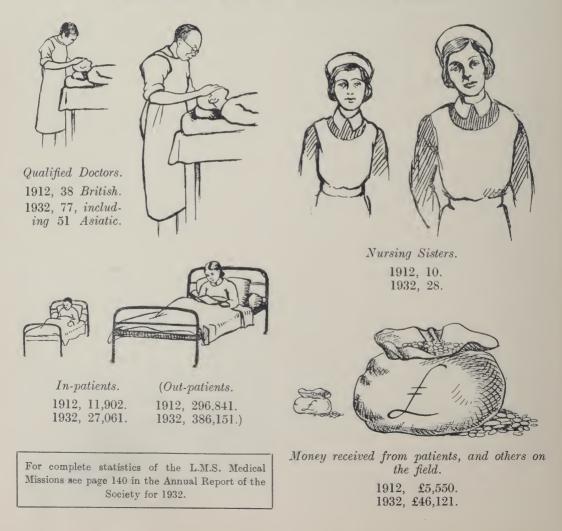
missionary is not a Christian teacher who has despaired of the use of words. He has other ways; but he does not think they are the only ways into the City of Mansoul. It is sheer disloyalty to our human inheritance to doubt the place of words.

VI

This is the month in which we of the L.M.S. have a great opportunity of showing our gratitude to our doctors and nurses, and our faith in their splendid enterprise. We go with them into their hospitals and by faith we share their toils and their sorrows and their unutterable joy. We can show our fellowship with them in a direct way. Let every one of us put a few questions to himself when the special day for gifts to Medical Missions comes round. Can I take as a matter of course the gifts which medical science brings me, while so many of my family are without them ? Can I honestly pray "Thy kingdom come on earth" and not include in the range of that prayer that the reign of the God Who heals our diseases may begin ? Can I let these men and women whom we have sent overseas do their work without the support and sympathy which I can give ?

If we ask these questions, we shall know how to answer them.

THE GROWTH OF TWENTY YEARS



THE CHRONICLE



Indian Nurses Face Risks

O less than twenty-two of the admissions to the medical ward were from our nursing staff, who have frequently fallen victims to malaria during the year. (Jiaganj, North India.)

The December Board Meeting

At the Board Meeting in December two important appointments were the subject of resolutions.

The Rev. T. Cocker Brown, B.A., B.D., of Shanghai, was appointed Foreign Secretary for China and Africa, in succession to Mr. F. H. Hawkins, LL.B., who will continue to hold office for another year, and Mr. R. Austin Pilkington, J.P., of St. Helens, was elected Treasurer of the Society in place of Mr. James C. Parsons, of Birmingham, retiring owing to the demands of his professional work, next June. Fuller notes on these friends will appear in a later issue of *The Chronicle*.

Changes at Chikka

Retiring from the Medical Missions of Jammalamadugu and Chikka Ballapura will, indeed, be like "pulling up the roots," for Mrs. Thomson and for me, but the wrench will be tempered by the knowledge that Dr. and Mrs. Driver have returned from furlough with renewed zeal and strength, and that Dr. and Mrs. Cutting are already with us. We echo the cordial welcome given by the Chikka Ballapura Church to Dr. and Mrs. Cutting, and thank them for coming out nine months earlier than they had intended to do. We wish them great joy and success in their missionary career in which they start peculiarly well fitted.

We feel sure that Drs. Driver and Cutting will receive valuable assistance from Dr. E. P. Azariah (a son of the Bishop of Dornakal), from Dr. E. Rajaratnam and our other medical evangelists and loyal staffs. Great responsibility will fall on Miss Morch and Dr. Rajaratnam during the next eighteen months while Dr. Cutting is occupied with post-graduate work and language study. (From T. T. Thomson, of Chikka Ballapura.)

A Record for Hong Kong

The number of in-patients admitted during the year was 1,936, this being a record in the history of the hospitals, showing that we are continuing to meet a medical need in the colony, while the fact that we are the only hospital under Mission auspices in the colony, gives us, at the same time, an opportunity and a responsibility which it should be our endeavour increasingly to meet in the years that lie ahead. (From F. R. Ashton, Hong Kong.)

Thrusting Out

In North China, where the Society is the sole ministry among millions of people, the idea of moving out to the unvisited places is constantly in the minds of our missionaries.

In his account of last year's activities, Dr. R. V. Liddell wrote about a small country market town, Shen P'o, twenty-five miles north-east of Siaochang. The plan was to open a temporary hospital there, and to follow up the medical work by a visit from the Clark Evangelistic Band. He said, "I am only sorry that my time there was so short, but it just made me feel that this was the work I should like to give myself to for the rest of my life."

Three rooms were rented at Shen-P'o, and in those rather cramped quarters during the visit which lasted a month, more than three hundred patients were seen, and about thirty operations performed.

Guns and Bandits in China

This year there were twenty-six in-patients suffering from gun-shot wounds, rather more Several of these were due to than last year. accidents. Folks can be extraordinarily careless about firearms. One man was cleaning his revolver when it was loaded; it went off and shot his wife in the face, fracturing her jaw. He got such a shock that he ran away, but his neighbours found him later and persuaded him to send his wife to hospital. Another man had come to the city to sell his grain shortly after harvest. As he was returning home with a lot of money, as well as supplies of cloth and cotton

Guns and Bandits in China (contd.)

wool for winter clothing, he carefully loaded his gun in case of bandits. But as his cart was going out of the city gate where the road is very rutty, the jolting of the cart shifted the gun, which went off, discharging its shot into the man's shoulder. On the other hand other cases make one realise the horrible cruelty to which man can descend, and how much this country needs the influence of the Gospel of Love. Some time during the early part of the year when there was an epidemic of raiding, kidnapping and robbing going on, a young woman was brought in in a very shocked condition, having been shot in the back. Her spine was injured and she was paralysed in both legs. A raid had been made on her village, and in spite of the armed guard who watched from their look-out post, entrance was made and she was kidnapped, not without first being wounded in the skirmish. When the kidnappers got away with her, they discovered they had made a mistake, for she was not the daughter of the rich family as they had supposed. Her family would not be able to pay much ransom for her, so, as she was wounded, they left her in the fields, where her relatives found her.

A young man who was guarding a threshing floor had the misfortune to meet with bandits who, because they could not get from him the information that they wanted, forced an iron rod, the spindle of a threshing roller, into his bowel, sending it home with the handle of a rake. We had some difficulty in locating this iron rod even with the patient under an anæsthetic, but finally felt it lying under his ribs on the left side. Having made sure it was really there we were able to operate and remove it. It was six inches long and over an inch thick. (*Tsangchow Hospital*, N. China.)

What is a Missionary Nurse?

There is a story which may truly be called one of "patient well-doing" behind the bare record that there are 28 missionary nurses in our L.M.S. hospitals.

Against their names in the Annual Report the letters "S.R.N." appear and they stand for "State Registered Nurse."

They are more than nurses. They are, in fact, nursing sisters who act as matrons in supervising the work of the great staff of trained native nurses at work to-day in our Medical Missions. Of these there is a total of 411 (four African, one Malagasy, and the rest Chinese and Indian), a fine company of devoted and efficient helpers, trained by the nursing sisters and doctors.

Little more than twenty years ago objection to the work of nursing was stubborn and general. In India a few middle-aged widows came to be employed, and in China there was a predominant belief that the work was unfit for young women. When it is remembered that the nurses in India and China can to-day be drawn from among the best educated classes, and that so large a number is actually at work, it will be clear that something like a triumph has been achieved in a short time. It is due to the faith and skill of the nursing sisters, who in addition to training and supervising the nurses have taken their full share in the evangelistic work, of which every hospital is a centre.



From a mural painting by the Hon. Mrs. Daphne Follen.

"As many as came to Him were healed."

The Way of Discipleship

Notes by the HOME SECRETARY.

Self-denial—Then and Now

HOSE whose memories go back a generation and who bear in mind the missionary happenings of 1900 will recall the enthusiasm which accompanied the work of self-denial as it was then observed. Some of us then learned for the first time the real flavour of tea as we drank it without sugar in order to help the L.M.S. What was begun as self-denial was continued as good taste. We took joyfully and with satisfaction our small and passing sacrifices in those days, and our spiritual life was undoubtedly helped. We should have been the stronger men and women to-day if we had not let it drop. Why not wholeheartedly revive it in 1933? Other times, other manners, of course, and yet the principle of giving something that really counts to the Kingdom of God is for ever valid. Food regime of 1933 does not count for as much as it did in 1900; we are physically a more Spartan generation, but the Pleasure regime has more than made up that difference, and the opportunity for self-denial is greater in our days than in the youth time of our fathers. Let us go into this matter seriously and with a view to action.

Our Modern Luxuries

The luxuries of the body which marked an older day were more patent but less expensive than the luxuries of the mind which are significant of our time. The entertainment tax alone on a theatre or cinema ticket would about equal the sugar expenditure of 1900. Papers and magazines in any given period probably involve a greater expenditure than sweetmeats ever meant to our parents-and we haven't given up the latter! The exercise of the mind is essential and good; its mere entertainment is quite another matter. There are many ways of self-denial open to us that 1900 scarcely knew. Which way to take is a matter for individual decision; we cannot judge one another in these things, but the acceptance

of the principle will do us all good in helping us to take very seriously and to make our own, God's call to us through the need of the world. Let us suppose that throughout this month of February we at least halved the amount we spend on the pleasures of the body and of the mind and gave that to the work of God through the L.M.S. The financial result would be surprising, but the spiritual result might be incalculable. For true self-denial is a real form of prayer.

Some Practical Hints

There are those who still have the habit of carrying with them, either in pocket or handbag, for use during whatever Lenten period they impose upon themselves, a small card box or a few strong envelopes in which their saved coins are placed. When they are handed in they can be as anonymous as you please (no one wishes to " advertise " self-denial), nor need the saving of expenditure limit the range of action. There are numbers of our people who set about the earning of extra money in such ways as are open to them and give that. There are so many of us over the whole kingdom that over $\pounds 10,000$ is a very little for each if widely spread. We have scarcely begun to realise the bigness of the thing that we might do if only we were all in it and could secure a consciousness of the strength that lies in active fellowship. Let us unite for a great and triumphant effort in February, 1933. We of the L.M.S. may save ourselves by our effort and help others by our example. It is, after all, the way of discipleship. N. B.

Postscript

Under the Allocation Scheme it was agreed to aim at an £8,000 increase by March 31st, 1933. Actually at the end of December, the total amount received is less than to the same date last year, by £4,700. Clearly every bit of effort and every bit of self-denial of which we are capable will be required to effect an increase of £8,000 over last year's total.

L.M.S. MEDICAL MISSIONS WEEK. The week beginning February 12th is the one during which many Churches and Schools will be thinking specially about the work being done in the Society's 46 Hospitals and Leper Asylums in India, China, Africa and Madagascar. Leaflets and envelopes are available for circulation during this special week of Thanksgiving, Prayer and Self-denial, and can be obtained on application to the Home Secretary, L.M.S., 42, Broadway, Westminster, S.W.1.

43

On the Veranda

BY R. J. ASHTON, B.A., M.B., C.M., formerly of Kachwa, North India.

NRY and picture yourselves as present at a Sunday afternoon service in a Medical Mission Hospital situated away out among the villages in the hot plains of Hindustan. Short ten-minute addresses are given every day in each ward of that hospital, but on Sunday afternoon, when there is more leisure, nearly the whole Christian staff, Indian and European, join voluntarily in conducting a more special united service to which everyone who wishes is freely invited. Usually it is held in a long, broad veranda stretching down one side of the main hospital block. India being a hot country, all the many doors and windows of the wards are wide open, so that most of the patients lying on their beds can see what is going on in the veranda, at any rate, they can hear what is being said or sung. And in addition to these patients on their beds there will be convalescents from other wards, and attendant friends or relations who have sauntered up on hearing the clang of the opening bell or the sound of the singing of the first hymn, curious to find out what is going on. These squat themselves down in irregular rows on the concrete floor, a motley congregation. And at one end of the veranda is the little group of Christians, the white Padre Daktar Sahib and his brown Indian Christian friends, helpers in the hospital and dispensary work.

The audience

The service is somewhat like, and yet so unlike, any service in our homeland. Remember that the audience is composed of Hindus and Mohammedans, most of whom have never been at a Christian service before; indeed, some possibly have never even heard the name of Christ, or even if they have, their ideas about Him would probably strike you as very strange. "There are so many gods," maybe a Hindu is saying to himself, "is this Jesus Christ just one of them, perhaps a white English god." Or a Mohammedan is thinking, "I, too, count the Illustrious Jesus (on whom be peace) as a great Prophet, not so great, of course, as Mohammed, who succeeded and superseded him; but how blasphemous to say of him that he is the Son of God."

At any rate, this audience is Indian, and so we try to make the service as Indian as possible, something that they may all share in and understand. We commence with a hymn, but purposely one as Indian as possible, not a rhymed version of an English one.

The band

The instrumental accompaniment, if any, is, by choice, Indian, too. The head dispenser rather fancies himself as a player on a notable Indian instrument the body of which is formed out of half a hollowed-out pumpkin or gourd, the sun-hardened rind of which makes a strong, serviceable bowl. This has parchment tightly stretched over it, and there is a wooden stem affixed, with metal wire strings. Squatting on the ground, he hugs his beloved instrument to his bosom, playing on the wires with a short bow, and as he plays he sways to the rhythm and sings for all he is worth. Then, of course, you must have a drum; no Eastern music is complete without a drum, and usually it is the youngest of the workers, the bottle-washer apprentice, who has secured the drum, and you see him with it on his knees, having an ecstatic time thrum-thrumming on it, not with a drumstick but with his knuckles, varied by a thump now and again with the palm of his hand, or even, to be extra emphatic, bringing down his elbow with a vicious, triumphant bang. Weird and strange are these sounds to unaccustomed European ears, but the sort of music an Indian understands and appreciates, and very real melody, too, once you have attuned yourself to it.

The hymn

Then the words, what are they ? Usually they tell of Jesus Christ, His character and His work as Friend, Healer, Deliverer, and Saviour. A very favourite hymn at such a ward service as this is one the chorus of which reiterates again and again that "He is the One who saves us from trouble." The singing over, one of the Christians stands forth and goes over the words again, not singing this time, but reciting them verse by verse, line upon line, explaining the meaning.

Thoughts of hearers

While this talk is going on, the English Missionary doctor is scanning the faces of the hearers and maybe saving to himself, "They seem to be listening well, most of them, but do they really understand and appreciate, let alone accept?" For instance, that old blind man, he can't see, though he has been operated on, for his eyes are still bandaged, but he seems to be attending appreciatively, for he keeps nodding his head and every now and again ejaculates, "It's true, it's true; what beautiful words!" But does he really mean what he is saving ? What do these Hindus and Mohammedans think about the cause of sickness and suffering and sin; and do they believe that there is anyone anywhere who can save them ? Suppose we go among them after the service is over and start quiet, friendly questioning. That old blind man, what will be his answer? Probably he is a quite illiterate Hindu villager, but by no means unintelligent. He may quite likely reply, "Don't you know, Sahib, that all that happens to us in this life was written on our foreheads just after we were born ?" The Hindu thinks that Vishnu comes down and writes on the forehead of the new-born babe all that will happen to that person in his or her after-life. But, maybe, sitting next to this blind fellow there is a man who has been to school and rather prides himself on his knowledge. "Yes," he says, "that's what the uneducated think, but we who know better, we would put it more this way, that if anything is written it was we who wrote it ourselves by our deeds in some previous existence, deeds the fruit of which, bitter or sweet, we must now eat according to the unfailing law of Karma. And indeed there is none anywhere who can deliver us from this; it is no good praying, even to the gods, for they, too, are subject to this inexorable law."

That's what the Hindus think. But ask a Mohammedan patient his opinion, and what will be his reply? Often merely in one hopeless word : "Kismet," "Fate." It just happens; they don't know why. But press a Mohammedan and he will often give you a better answer : "It is the will of God." But what is the Mohammedan idea of God? He is certainly not thinking as we Christians should, of the God and Father of our Lord Jesus Christ, a Father of love and compassion, One who counts every hair of our head, and not a sparrow falls to the ground but He knows and cares. No, the Mohammedan idea of God is rather that of some autocratic Eastern monarch, a Badshah whose will or whose whim is the law.

The cause of suffering

But if you really get to the back of their minds, be they Hindu or ordinary village Mohammedan, you will usually find quite other ideas of the causes of sickness, pain, and all misfortune. They are grossly superstitious and put it all down to the malignant action of some ghost or evil spirit or demoniacal goddess. Often before coming to the hospital they have first resorted to an exorciser of demons, and paid what to them are large sums of money and have undergone severe beatings and pummellings, to get the evil spirit driven out; and only as a last resource have they been persuaded to try what the Western trained doctor can do with his magic foreign medicine or fearsome knife. And even after they have



Dr. Ashton seeing out-patients.

A service on the hospital veranda.

been cured in the Christian hospital the Hindu patient will in many cases, before returning to his home, make his way first to the shrine of Bhagauti Mai, the dread mother goddess whom the Thugs and professional stranglers and poisoners used to regard as their tutelary deity, the horrible embodiment of all the malignant powers, the cause of sickness, plagues, famine, and murderous death. It is a religion mainly of fear, and the worship consists of propitiating her with the blood she loves; a black goat has its head lopped off by one blow of the sacrificial knife and the blood pours out over the little earthen altar placed outside the shrine of the Black Mother.

Our part

Knowing this, do you wonder that the Christian missionary longs to give a better picture of God than that, to tell them of Jesus Christ, the true image of the Invisible God, He who alone by His life and character and word and deed is able to make us believe in His Father and our Father, the loving compassionate Healer and Deliverer and Saviour, the embodied Good News. The Christian medical missionary by the very nature of his calling must be an evangelist : he heals in the Name of Christ, and cannot but speak the things he has heard and seen of Him.

The answer to those, be they ultra-old orthodox or modernist, religious leaders, Eastern or Western, who would have us treat medical missions as a sort of philanthropic side-show, is that philanthropy, the love of man, is not enough. Loving service of one's neighbour is, as who but Jesus so plainly taught us, a very real essential part of religion; but to Him and to us His followers, the love of God must come first, the love of God in Christ for man, and man's love with his whole heart and mind and soul of that kind of God. Philanthropy is the fruit, not the root. After all, the root comes first and goes deep into the primitive soil, transmuting the dead into the living. Our Lord's command to His disciples still is: "As ye go, preach, teach. heal." Obviously the three methods go together and are not intended to be separated.

Students in Edinburgh

A Letter to the Literary Superintendent

DEAR MR. SHILLITO,—Readers of *The Chronicle* would be thrilled to see 1,700 students meeting in the Assembly Hall of the Church of Scotland for their Quadrennial International and Missionary Conference.

I believe that the Student Christian Movement is one of the greatest missionary forces in the world to-day. Sometimes one gets the impression that students are always asking questions and never finding answers. But when you look into it, you discover that they must have found an answer because so many old Student Movers are working for God in different parts of the world. Many of our L.M.S. missionaries in the past, and the majority of those going out to-day owe much to the Student Movement.

The subject of the Conference is the Christian faith in the world. We are trying to see how the Christian faith can be believed in this modern world. Has the Christian Church really got an answer to our many questions a solution for our complex problems ? Can we be sufficiently pure in heart to see God ?

Very many of the speakers are missionaries,

and much time is being given to the study of mission work and the growth of the younger churches.

It is good to see many L.M.S. folk here four or five missionaries, including E. R. Hughes, who is a speaker. Mr. Bitton and Mr. Chirgwin are representing the Mission House, and there are also several of our candidates, and I hope many prospective candidates.

I wish you were here ; it does one good to hear 1,700 students singing, "Rise up, O men of God."

Some no doubt will this week find that their vocation is to serve God on the Mission Field. Others will see that their calling is to serve at home. Many will know for the first time that God lives, and that His power is available for them. Perhaps a few will find nothing new; but they cannot go away entirely unmoved. The spirit of God is in this place, and we see once again that He alone can show us the way to life.

JOYCE RUTHERFORD. Edinburgh, January, 1933.



Letters to Hilary .- By Stephen King-Hall (Benn Bros. New cheap edition, 3s. 6d. net, postage 51d.). Most people will put down "Letters to Hilary" with a sigh of envy for the "small person whose education was becoming a problem," for whom Mr. Stephen King-Hall wrote them. Those readers who have listened to Commander King-Hall on the wireless, as he has explained difficult things like the gold standard and foreign relations, will find the same simple, vivid, unforgettable style in this book. "Letters to Hilary" tell the story of the world for a child of ten. But there are many grown-ups who will learn much from the book, or, if they are already encyclopædias of world history, they will find their knowledge stimulated and freshened. It is just as important, says Mr. King-Hall, to know what the people in China or America or India think and why they think it, as it is to know about our own history, and very clearly and simply he deals with China, India, and the other great countries of the world. Not the least valuable part of the book are the "Helper's Notes" at the end. To read these is a liberal education for any grown-up, and makes one long to start following out the suggestions made in them without a second's delay. This should prove a stimulating book for missionary teachers who want to give their pupils some knowledge of international history, and to introduce them to big ideas in simple ways. It would, of course, need adapting to their scholars' special needs, but it would provide the stimulus and interest and train of suggestive ideas which should make such adaptation easy.

The Faiths of Mankind.-By William Paton, M.A.

(Student Christian Movement Press, 27. 6d., postage 2d.). Some years ago, Mr. Paton published a valuable book which has been very widely used, "Jesus Christ and the World's Religions." His new book, "The Faiths of Mankind," deals with the same field of study, but approaches it in a new way. Instead of taking the religions one by one and expounding their teaching, he takes in this book a number of subjects, "Man and his World," "God," "Sin, Suffering and Salvation," and others, and shows how each religion deals with these. Under each chapter, therefore, it is possible to see the relation between the teaching of Christianity and that of other religions upon some great and fundamental questions.

It will be a book of remarkable interest to anyone who is disposed to think that all religions are more or less true, and that it is unwise to disturb the thoughts of those who are traditionally Hindu or Moslem or Buddhist. By taking these subjects one by one, Mr. Paton most clearly shows that the Christian Gospel stands by itself, and has its own distinctive answer to give to the great questions which men have been asking. There is no religion which has the same answer to offer. This book will bring reassurance to those who are tempted to adopt the position that in the present hour the people of all religions should set aside their differences and join together in a common defence of the belief in God.

The seventh chapter, which deals with the case for the Christian world mission, is one that should be read by all who are trying to think their way through the confusion of the present hour.

The author's own position cannot be better expressed than in the following passage : "The faith that Christians have in Christ in no way depends upon the support or opposition of the currents of life in the modern world. That faith is an apprehension of the supreme reality of God, who in His mercy and grace has given Himself to mankind in His Son, so that those who give themselves in faith and love to Jesus do in very truth meet with the Eternal God. It is not a religion in which God is submerged in the natural order; nor one in which His moral nature is lost in the pantheistic Absolute; nor one in which His will is done by certain legal observances, leaving the rest of life unredeemed. It is a religion more for conquering the world than even for explaining it, for all men have to live and take their share in redeeming the natural by the power of the supernatural, while only the few have the power or leisure to think about it. It calls us to find in the world of nature-not in a part of it only, but in the whole of it—a sphere where God's love and grace can be found fully manifested. It calls us, as Dr. Oman says, to deny the world, but only in the sense that we do not allow the world to possess

"For a faith such as this the question of a worldwide mission is scarcely matter for debate. For those who believe that God was in Christ reconciling the world to Himself, and that Jesus Christ came into the world to save sinners, it cannot be an open question whether the news of this supreme act of God shall be made known. The Christian Mission is not the sharing of a religious culture ; it is the sharing of good news about God."

It should be added that this book is published by the Student Christian Movement, and can be had from the Livingstone Bookroom, price 2s. 6d.

Reading for the Lonely.

The L.M.S. Missionaries' Literature Association, The L.M.S. Missionaries Literature Association, which is referred to from time to time in our columns, is especially in need just now of : "The Congrega-tional Quarterly," "Good Housekeeping," "Hibbert Journal," "My Magazine," "Manchester Guardian," "Quiver," "Spectator," "Weekly Times," "Ex-pository Times," "Graphic," "Illustrated London News," "International Review of Missions," "Punch," "Review of Reviews," "Sphere," "Chambers's, Scientific papers women's periodicals Educational Scientific papers, women's periodicals. Educational papers, children's books and papers.

If any of our readers can spare any of the above when they have done with them it would be doing a real kindness to our overseas workers if they would post them. On receipt of a postcard to the Hon. Secretary of the Association : Miss F. Williams, 27, Apsley Road, Clifton, Bristol, an address would most gladly be sent. May we say "Thank you" in anticipation? This is a work well worth while.

Any book mentioned on this page can be procured through the Livingstone Bookroom.



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